Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

10053614

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
		-11	(Column	1)	(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			7				[RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		* Ø		İ	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* Ø		Ì	X42=		OR	X84=	3
MULTIPLE DEPENDENT CLAIM PRESÉNT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2	Ŀ	TOTAL	37n	OR	TOTAL	
CLAIMS AS AMENDED - PART II								1			OTHER	THAN
	pane to a 17 to 18 minutes income	(Column 1)	,	(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT O			CLAIM		ŀ	+140=		OR	+280=		
	TOTAL											
		ļ	ADDIT. FEE		OR	TOTAL ADDIT. FEE						
_	The state of the s	(Column 1)	Average communication as a	(Colu		(Column 3)	_					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		, OR	X\$18=	
	Independent	*	Minus	***	CL AIM	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	, ,
										OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											•
* If the entry is column 1 is less than the entry is column 0, write #07 is column 0										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		ther Previously Pa					r fa	nd in the con	ransiata ha	, in aa	lumn 1	